



KY EXCEL Advocate Membership Application

Return this completed form and its attachments to:

KY EXCEL

Division of Compliance Assistance

300 Fair Oaks Ln.

Frankfort, KY 40601

1-800-926-8111

Fax: 502-564-9720

I. APPLICANT INFORMATION

1. Organization Name: _____
2. Street Address: _____

3. Mailing Address (If different from above): _____
4. County: _____
5. Provide a brief description of your organization. If your organization is a business, include any NAICS codes used to classify your facility:

6. How many individuals does your organization employ? _____
7. Organization's Web site: _____

II. CONTACT INFORMATION

8. Contact Name: _____
9. Contact Title: _____
10. Contact Mailing Address: _____
11. Phone: _____ 12. Fax: _____
13. E-mail: _____

III. APPLICATION TYPE

14. Type of Application: _____ New Membership
_____ Membership Renewal
_____ Membership Upgrade

IV. ATTACHMENTS

- I have attached a Voluntary Project Proposal Form for each project that my organization would like to complete as a member of KY EXCEL. (Advocate membership requires at least one voluntary project each year.)

V. CERTIFICATION STATEMENT

I certify that the information provided in this membership application and its attachments are accurate to the best of my knowledge and that my organization's participation in this program is entirely voluntary. I understand that the Division of Compliance Assistance reserves the right to accept, deny or terminate KY EXCEL membership. My organization places a high priority on meeting our environmental responsibilities. We have an ongoing commitment to evaluate and improve our processes to maximize compliance and to minimize any adverse environmental impacts. This commitment is communicated to our employees as well as to our customers. We are committed to the spirit of the program and will work diligently to further the program's goals. My organization will make good faith efforts to complete the commitments we have made as a KY EXCEL member. My organization will also be available to mentor others when requested.

Applicant Name: _____ Title: _____

Signature: _____ Date: _____

APPLICATION INSTRUCTIONS

SECTION I. APPLICANT INFORMATION

Organization Name: Enter the name of your business, industry or organization applying for membership. If you are applying as an individual, enter your first and last name.

Street Address: List the street address (physical location) of the organization.

Mailing Address: List the mailing address for your organization if it is different than the street address listed in Number 2.

County: List the county where the organization is located.

Organization Description: Provide a brief narrative about your organization. If your organization is a business, include any North American Industry Classification System (NAICS) codes used to classify your business. If multiple codes are used to classify your business, include all of the appropriate codes, but indicate the code that would best serve as the "primary" classification of your organization. A list of NAICS codes may be found at www.census.gov/epcd/www/naicstab.htm.

Employees: List the number of employees that work for your organization.

Web site: If your organization has a Web site, enter the Web site address.

SECTION II. CONTACT INFORMATION

Contact Name: Enter the name of the person to whom inquiries regarding this application or your KY EXCEL membership should be directed.

Contact Title: Provide the title of the organization's contact person.

Contact Mailing Address: List the mailing address for the organization's contact person.

Phone: List the phone number of the organization's contact person.

Fax: List the fax number of the organization's contact person.

E-mail: List the e-mail address of the organization's contact person.

SECTION III. MEMBERSHIP REQUESTED

Type of Application: Indicate whether the application is for a new membership, a membership renewal or a membership upgrade.

SECTION IV. ATTACHMENTS

Attach all of the items described in this section to this application. Remember that a separate Voluntary Project Proposal Form must be completed for **each** project being proposed.

SECTION V. CERTIFICATION STATEMENT

All KY EXCEL applicants must sign the certification statement before they can become accepted into the program. If the applicant is an organization or business, a responsible official authorized to speak on behalf of the organization or business must sign the certification. Applications that do not have the certification statement completed will not be accepted.